

**Medical Release Form
2019**

School Name

_____ has our permission to attend Junior High Honor Choir at Joplin East Middle School on Saturday March 2, 2019. If our child, whose name appears above, should need medical attention to, from or while at All-District Junior High Honor Choir, Lauren Lee-coordinator, or our school vocal music instructor or sponsor, has our permission to take our child to a doctor, hospital, or other medical institution for necessary medical treatment.

(Parent or Guardian's Signature)

.....
Medication the above singer is currently taking:

List any allergic reaction to any medication the singer may have:

List any other medical information that you feel should be known about your Child:

Please list your medical insurance company:

Policy # _____

In case of emergency, notify:

#1 Name of

Contact _____ Address _____

Phone _____ (number where you can be reached during the event)

#2 Name of

Contact _____ Address _____

Phone _____